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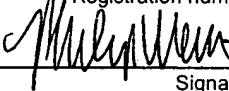
1626



PTO/SB/22 (12-04)

Approved for use through 07/31/2006. OMB 0651-0031
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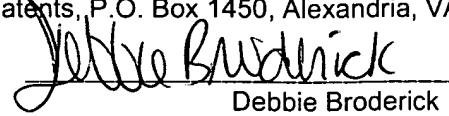
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) |
|---|------------|---|
| FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | P/113-14 |
| Application Number 10/695,613 | | Filed October 28, 2003 |
| For BABY AND TODDLER SUNGLASSES | | |
| Art Unit 2873 | | Examiner H. Dang |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | |
| | <u>Fee</u> | <u>Small Entity Fee</u> |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | 08/19/2009 MGEDREMI 00000027 10695613 |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed. | | 01 FC:2253 555.00 D |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | |
| <input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____. | | I have enclosed a duplicate copy of this sheet. |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | |
| I am the <input type="checkbox"/> applicant/inventor. | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). | | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 34,751 | | |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | |
|  | | 8/18/09 |
| Signature | | Date |
| Philip M. Weiss | | 516-739-1500 |
| Typed or printed name | | Telephone Number |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of _____ forms are submitted.**CERTIFICATION UNDER 37 C.F.R. § 1.10**

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EM 409054055 US addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: August 18, 2009


 Debbie Broderick